BEST AVAILABLE COPY



Application or Docket Number

09/831346

	(Column 1) (Column 2)							SMALL ENTITY			OTHER THAN	
	OTAL CLAIMS					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		RATE	FEE	OR	RATE	FEE
F	FOR	NUMBER	NUMBER FILED		NUMBER EXTRA		BASIC FE		OR		 	
TOTAL CHARGEABLE CLAIMS			46m	4 6 minus 20=		26		X\$ 9=		OR		408
11	NDEPENDENT (CLAIMS		ninus 3 =	* 1	\		X40=	 	7	 	
N N	ULTIPLE DEPE	NDENT CLAIM I	RESENT						 	OR	X80=	80
٠	If the difference	e in column 1 is	less than zero, enter "0" in			solump 3		+135=	ļ	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in colu CLAIMS AS AMENDED - PART II								TOTAL	<u></u>	OR	TOTAL	1408
		ンに必いりる AS / (Column 1)	AMENDE					SMALL	FNTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVICE PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	7	RATE	ADDI- TIONAL FEE
	Total	۵	Minus	άά		=		X\$ 9=		OR	X\$18=	
	Independent	ENTATION OF M	Minus	***	01.414.4	=		X40=		OR	X80=	} <u></u>
<u></u>	Trinoi Frico	ENTATION OF M	OLTIPLE DE	PENDENI	CLAIM			+135=		OR	+270=	
								TOTAL			TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	Α	DDIT. FEE	L]	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
RON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	٠	Minus	###		=	-	X40=			X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR		
•								+135=		OR	+270=	
	۰						Αl	TOTAL DDIT. FEE		OR A	TOTAL ADDIT. FEE	
	<i>§</i>	(Column 1)	<u>്</u> നെ രാഹാക്കു	(Colum		(Column 3)			•			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	o .	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	pendent : Minus : ST PRESENTATION OF MULTIPLE DEPENDENT CLAIR			=		X40=		ŀ	X80=		
	I LINOI PHESE	MIATION OF MU	JUIPLE DEF	'ENDENT (JLAIM		-			OR		
0	If the entry.In colu	L.	+135= TOTAL		OR	+270=						
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Paid	id For IN THIS ild For IN THIS	S SPACE IS I S SPACE IS I	ess than	20, enter "20." 3. enter "3."		DIT. FEE			TOTAL DDIT. FEE mn 1.	